

## FORM 8. Entry of Appearance

## UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT

Nina Olsonv. Merit Systems Protection BoardNo. 15-3023-VW

## ENTRY OF APPEARANCE

(INSTRUCTIONS: Counsel should refer to Federal Circuit Rule 47.3. Pro se petitioners and appellants should read paragraphs 1 and 18 of the Guide for Pro Se Petitioners and Appellants. File this form with the clerk within 14 days of the date of docketing and serve a copy of it on the principal attorney for each party.)

Please enter my appearance (select one):

☐ Pro Se☒ As counsel for:Nina Olson

Name of party

I am, or the party I represent is (select one):

☒ Petitioner☐ Respondent☐ Amicus curiae☐ Cross Appellant☐ Appellant☐ Appellee☐ Intervenor

As amicus curiae or intervenor, this party supports (select one):

☐ Petitioner or appellant☐ Respondent or appellee

My address and telephone are:

Name:

Robert S. Horwitz

Law firm:

Law Offices of A. Lavar Taylor

Address:

3 Hutton Centre Drive, Suite 500

City, State and ZIP:

Santa Ana, CA 92707

Telephone:

(714)546-0445

Fax #:

(714)546-2604

E-mail address:

rhorwitz@taylorlaw.com

Statement to be completed by counsel only (select one):

☒ I am the principal attorney for this party in this case and will accept all service for the party. I agree to inform all other counsel in this case of the matters served upon me.

☐ I am replacing \_\_\_\_\_ as the principal attorney who will/will not remain on the case. [Government attorneys only.]

☐ I am not the principal attorney for this party in this case.

Date admitted to Federal Circuit bar (counsel only): 12/02/1994

This is my first appearance before the United States Court of Appeals for the Federal Circuit (counsel only):

☒ Yes ☐ No

☐ A courtroom accessible to the handicapped is required if oral argument is scheduled.

Nov. 3, 2014  
Date

Robert S. Horwitz  
Signature of pro se or counsel

cc: \_\_\_\_\_

FORM 30. Certificate of Service

UNITED STATES COURT OF APPEALS  
FOR THE FEDERAL CIRCUIT

CERTIFICATE OF SERVICE

I certify that I served a copy on counsel of record on  
by:

November 5, 2014

- ☐ US mail  
☐ Fax  
☐ Hand  
☒ Electronic Means  
(by email or CM/ECF)

Robert S. Horwitz

Name of Counsel

/s/

Signature of Counsel

Law Firm

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NOTE: For attorneys filing documents electronically, the name of the filer under whose log-in and password a document is submitted must be preceded by an "/s/" and typed in the space where the signature would otherwise appear. Graphic and other electronic signatures are discouraged.